

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEVADA

UNITED STATES OF AMERICA,)
)
Plaintiff,) In Equity No. C-125-ECR
) Subfile No. C-125-B
WALKER RIVER PAIUTE TRIBE,)
) NOTICE OF CHANGE OF
Plaintiff-Intervenor,) OWNERSHIP OF WATER RIGHT
)
v.)
)
WALKER RIVER IRRIGATION DISTRICT,)
a corporation, et al.,)
)
Defendants.)

The undersigned counter-defendant in the above action hereby notifies the Court and the United States that the undersigned (or the entity on whose behalf the undersigned is acting) has sold or otherwise conveyed ownership of all or a portion of a water right within one or more of the categories set forth in Paragraph 3 of the Case Management Order and provides the following information:

1. The name and address of the party or parties who sold or otherwise conveyed ownership:

The Rolene Pitt Guild Living Trust
Monica Viola Berhman, Successor Trustee

Name(s)

1209 Canyon Ridge Lane

Street or P.O. Box

Escondido
Town or City

CA
State

92025
ZipCode

2. The name and address of each person or entity who acquired ownership
Monica Berhman and John Berhman

Name(s)

1209 Canyon Ridge Lane

Street or P.O. Box

Escondido
Town or City

CA
State

92025
ZipCode

3. Attached to or included with this notice is a copy of the (check appropriate
box(es)):

☒ Deed

☐ Court Order

☒ Other Document. - Affidavit of Death

by which the change in ownership was accomplished.

4. The undersigned acknowledges that any person or entity who files a Notice of
Change of Ownership of Water Right using this form is ultimately responsible for the accuracy
of this filing. Consequently, the undersigned acknowledges that any person or entity who files

*

This notice shall be sent to the following two persons:

Linda Lea Sharer, Chief Deputy Clerk
United States District Court for the District of Nevada
400 South Virginia Street, Suite 301
Reno, NV 89501

And

Susan L. Schneider
United States Department of Justice
P.O. Box 756
Littleton, CO 80160

such a notice, but retains such water rights, shall nevertheless be bound by the results of this litigation.

Executed this 11th day of February ²⁰¹¹~~200~~.

Monica Berhman
Successor Trustee of the
Rolene Pitt Guild Living Trust

[signature of counter-defendant]

Monica Viola Berhman,
Successor Trustee of the
Rolene Pitt Guild Living Trust

[name of counter-defendant]

[signature, if applicable, of person acting on
behalf of counter-defendant]

[name, if applicable, of person acting on
behalf of counter-defendant]

1209 Canyon Ridge Lane
Escondido, CA 92025

[address]

760-803-1577
[telephone number]

THE UNDERSIGNED HEREBY AFFIRMS THAT THIS DOCUMENT
DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

APN: 14-401-11

RPTT: _____

When Recorded mail to:

Monica Berhman
1209 Canyon Ridge Lane,
Grantees Address: Escondido, CA 92025

(same)

DOC # 470944

Confirmed Copy

(Not Compared to Original)

01/20/2011

03:39 PM

Official Record

Requested By
MONICA BERHMAN

Lyon County - NV
Mary C. Milligan - Recorder

Date 1/20/2011

GRANT DEED

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

Monica Viola Berhman successor trustee of the
Rolene Pitt Guild Living Trust dated 3-10-98
do(es) hereby GRANT TO

Monica Berhman and John Berhman
husband and wife as joint tenants
the real property situate in the County of Lyon, State of Nevada, described as follows:
See Exhibit A

TOGETHER WITH all tenements, hereditaments and appurtenances thereunto belonging or in anywise
appertaining, and any reversion, remainders, rents, issues or profits thereof.

STATE OF NEVADA

COUNTY OF Lyon

On January 20th, 20 11, before
me, the undersigned, a Notary Public in and for
said County and State, personally appeared

Monica Berhman

Monica Berhman
(Signature)

Monica Berhman
(Type or Print Name)

(Signature)

(Type or Print Name)

known to me to be the person(s) whose name(s) is/are
subscribed to the within instrument, and acknowledged
to me that he/she/they executed the same
WITNESS my hand and official seal.

Lorna Thomas
(Notary Public)

Notary Seal

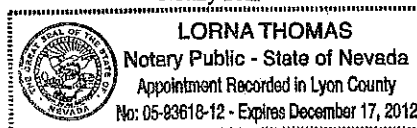


Exhibit A

The East one-half (E1/2) of the Northwest one-quarter of Section Thirteen (13) in Township Thirteen (13) North, Range Twenty-five (25) East, M.D.B.&M.; together with all ditches and ditch rights, water and water rights belonging to said lands and also Three (3) shares of the capital stock of the Fox Ditch Company, Inc., and our interest in the so-called Fox back ditch and all of the water represented by said shares; together with all improvements upon said ranch situated. The Southwest quarter of the Northwest quarter of Section 13 in Township 13 North, Range 25 East, M.D.B.&M., together with all water and water rights, ditches and ditch rights appurtenant to or used in connection therewith, records of the County Recorder of Mason Valley, Lyon County, State of Nevada.

SUBJECT TO AND TOGETHER WITH rights of way, all gas, oil, metals, water and mineral rights, reservations, restrictions, exceptions, easements, covenants, conditions record, encumbrances and current taxes.

APN: 14-401-11

Legal description taken from deed # 217306
recorded on April 10, 1998 in the Lyon
County records.

This document includes a certified death certificate as required by NRS 40.525 (3) which contains a social security number as required by NRS 440.380(1)(a).

Signature: Monica Berhman
Print name & title: Monica Berhman
successor Trustee
A.P.N. 14-401-11

AFFIDAVIT - DEATH OF Trustee

GRANTEE ADDRESS:
1209 Canyon Ridge Lane
Escondido, CA 92025

DOC. H 470943
Conformed Copy
(Not Compared to Original)
01/20/2011 03:38 PM
Official Record
Requested By
MONICA BERHMAN
Lyon County - NV
Mary C. Milligan - Recorder

For Recorders Use Only

I, Monica Berhman, of legal age, being first duly sworn, depose and say:
Rolene Pitt Guild Trustee of Rolene Pitt Guild Living Trust
That dated 3-10-98 is is the decedent mentioned in the attached certified copy of the Certificate of Death, is the same person as Rolene Viola Guild named as one of the parties in that certain deed dated March 10, 1998, executed by Rolene Pitt Guild to Rolene Pitt Guild as trustee under the Rolene Pitt Guild Living Trust dated 3-10-98, recorded as Instrument No. 217306 on April 10, 1998, in the Official Records of Lyon County, Nevada, covering the real property situate in the County of Lyon, State of Nevada, described as follows: See Exhibit A

* I, Monica Viola Berhman am appointed within the aforementioned trust agreement to serve as the sole successor Trustee of the Rolene Pitt Guild Living Trust.

STATE OF Nevada
COUNTY OF Lyon

Signed: Monica Berhman
Monica Berhman
(Print name above)

Signed and sworn to before me
on January 20th, 2011,
by Monica Berhman

Lorna Thomas
(Signature of Notary)



LORNA THOMAS
Notary Public - State of Nevada
Appointment Recorded in Lyon County
No: 05-83618-12 - Expires December 17, 2012

Notary Seal

Exhibit A

The East one-half (E1/2) of the Northwest one-quarter of Section Thirteen (13) in Township Thirteen (13) North, Range Twenty-five (25) East, M.D.B.&M.; together with all ditches and ditch rights, water and water rights belonging to said lands and also Three (3) shares of the capital stock of the Fox Ditch Company, Inc., and our interest in the so-called Fox back ditch and all of the water represented by said shares; together with all improvements upon said ranch situated.

The Southwest quarter of the Northwest quarter of Section 13 in Township 13 North, Range 25 East, M.D.B.&M., together with all water and water rights, ditches and ditch rights appurtenant to or used in connection therewith, records of the County Recorder of Mason Valley, Lyon County, State of Nevada.

SUBJECT TO AND TOGETHER WITH rights of way, all gas, oil, metals, water and mineral rights, reservations, restrictions, exceptions, easements, covenants, conditions record, encumbrances and current taxes.

APN: 14-401-11

Legal description taken from deed # 271306
recorded on April 10, 1998 in the Lyon
County records.

COUNTY OF SAN DIEGO

3052010209382

CERTIFICATE OF DEATH

3201037018293

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given)		3. LAST (Family)	
ROLENE		GUILD	
2. MIDDLE		4. DATE OF BIRTH - month/day/year	
VIOLA		07/29/1921	
5. AGE Yrs.		6. SEX	
89		F	
7. DATE OF DEATH - month/day/year		8. HOUR (24 Hours)	
12/03/2010		1517	
9. BIRTH STATE/FOREIGN COUNTRY		10. SOCIAL SECURITY NUMBER	
UTAH		528-20-5400	
11. EVER IN U.S. ARMED FORCES?		12. MARITAL STATUS (at time of death)	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		WIDOWED	
13. EDUCATION - (Highest Level Degree)		14. WAS DECEDENT HISPANIC/LATINO/SPANISH? (If yes, enter and write on back)	
SOME COLLEGE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		15. DECEDENT'S RACE - (Up to 3 races may be listed (see worksheet on back))	
16. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		17. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, food production, employment agency, etc.)	
POSTMASTER		U.S. POSTAL SERVICE	
18. YEARS IN OCCUPATION		19. YEARS IN BUSINESS OR INDUSTRY	
38		38	
20. DECEDENT'S RESIDENCE (Street and number, or location)			
105 EAST HIGHWAY 95A			
21. CITY		22. COUNTY/PROVINCE	
YERINGTON		LYON	
23. ZIP CODE		24. YEARS IN COUNTY	
89447		65	
25. STATE/FOREIGN COUNTRY		26. INFORMANT'S NAME, RELATIONSHIP	
CA		MONICA BERHMAN, DAUGHTER	
27. INFORMANT'S MAILING ADDRESS (Street and number, or street route number, city or town, state and zip)		28. NAME OF SURVIVING SPOUSE/SPO - FIRST	
1209 CANYON RIDGE LANE, ESCONDIDO, CA 92025		29. MIDDLE	
		30. LAST (BIRTH NAME)	
		-	
31. NAME OF FATHER/PARENT - FIRST		32. MIDDLE	
EARL		33. LAST	
		PITT	
34. NAME OF MOTHER/PARENT - FIRST		35. MIDDLE	
STELLA		36. LAST (BIRTH NAME)	
		GLEDHILL	
37. BIRTH STATE		38. BIRTH STATE	
UTAH		UTAH	
39. DISPOSITION DATE - month/day/year		40. PLACE OF FINAL DISPOSITION	
12/09/2010		VALLEY VIEW CEMETERY	
41. TYPE OF DISPOSITION		42. SIGNATURE OF EMBALMER	
TR/BU		THEODORE NILSEN	
43. NAME OF FUNERAL ESTABLISHMENT		44. LICENSE NUMBER	
POWAY-BERNARDO MORTUARY		FD-1195	
45. SIGNATURE OF LOCAL REGISTRAR		46. LICENSE NUMBER	
WILMA WOOTEN, MD		A77186	
47. DATE - month/day/year		48. LICENSE NUMBER	
12/08/2010		EMB6408	
49. PLACE OF DEATH		50. IF HOSPITAL, SPECIFY ONE	
SCRIPPS GREEN HOSPITAL		<input checked="" type="checkbox"/> Inpatient <input type="checkbox"/> Outpatient <input type="checkbox"/> Other	
51. CITY		52. IF OTHER THAN HOSPITAL, SPECIFY ONE	
SAN DIEGO		<input type="checkbox"/> Nursing Home <input type="checkbox"/> Hospice <input type="checkbox"/> Other	
53. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location)		54. CITY	
10666 N TORREY PINES ROAD		LA JOLLA	
55. CAUSE OF DEATH		56. DEATH REPORTED TO CORONER?	
IMMEDIATE CAUSE (If first obvious or condition resulting in death)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
A. CARDIOGENIC SHOCK		57. HOURS	
B. CRITICAL AORTIC STENOSIS		58. YEARS	
C. CORONARY ARTERY DISEASE		59. BIOPSY PERFORMED?	
D. BALLOON AORTIC VALVULOPLASTY & CORONARY STENT (URGENT) 12/03/2010		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
E. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107		60. AUTOPSY PERFORMED?	
		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
61. USED IN DETERMINING CAUSE?		62. USED IN DETERMINING CAUSE?	
<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	
63. SIGNATURE AND TITLE OF CERTIFIER		64. LICENSE NUMBER	
CURTISS TYLER STINIS, M.D.		A77186	
65. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE		66. DATE - month/day/year	
CURTISS TYLER STINIS, M.D.		12/07/2010	
67. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE		68. DATE - month/day/year	
CURTISS TYLER STINIS, M.D.		12/03/2010	
69. MANNER OF DEATH		70. INJURED AT WORK?	
<input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Covered by coroner		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
71. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		72. INJURY DATE - month/day/year	
		12/03/2010	
73. DESCRIBE HOW INJURY OCCURRED (events which resulted in injury)		74. HOUR (24 Hours)	
75. LOCATION OF INJURY (Street and number, or location, and city and zip)		76. SIGNATURE OF CORONER / DEPUTY CORONER	
		77. DATE - month/day/year	
		78. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	
		79. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	
80. STATE REGISTRAR		81. FAX AUTH#	
A B C D E		CENSUS TRACT	



A002201014

County of San Diego - Department of Health Services - 3851 Rosecrans Street. This is to certify that, if bearing the OFFICIAL SEAL OF THE STATE OF CALIFORNIA, the OFFICIAL SEAL OF SAN DIEGO COUNTY AND THEIR DEPARTMENT OF HEALTH SERVICES EMBOSSED SEAL, this is a true copy of the ORIGINAL DOCUMENT FILED. Required fee paid.

DATE ISSUED: December 13, 2010

WILMA J. WOOTEN, MD
REGISTRAR OF VITAL RECORDS
County of San Diego

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar

